Roof Access Permit

This permit is completed by: (1) Contractor supervisor/manager of contracted employees who will access the roof; with

(2) UW Point of Contact (project manager/supervisor/building coordinator). If there are changes to the scope of work, hazards, and/or safeguards identified on an active Roof Access Permit, a new Roof Access Permit must be completed.

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| --- | --- | --- | --- | --- | --- | --- |
| General Information | | | | | | |
| Person(s) and Company Requesting Permit: Click to enter text | | | | | | |
| Building: Click to enter text | | | | | | |
| Area of roof to be accessed (be specific – attach sketch/photos of roof and area of intended access): Click to enter text | | | | | | |
| Task to be performed: Click to enter text | | | | | | |
| Date(s) of access: Start date: Click to enter date Close date: Click to enter date  Click here to enter text. | | | | | | |
| Date of Pre-task planning meeting of Contractor and UW Point of Contact : Click to enter date | | | | | | |
| Identification of Potential Hazards (check all that apply) | | | | | | |
|  | Low slope roof (4:12 or less) |  | Rooftop obstructions greater than 30 inches high | |  | Different levels of roof requiring access |
|  | Steep slope roof (greater than 4:12) |  | RF radiation (cell phone tower) | |  | Elevated mechanical equipment within 10 feet of perimeter edge |
|  | Parapet wall less than 42 inches high |  | Perimeter leading edge work | |  | Slippery when wet |
|  | Skylights |  | Roof openings (ladder openings, holes, etc.) | |  | Other: Click to enter text |
|  | Controlled access zone |  | Roof hatches within 10 ft. of perimeter edge | |  | Other: Click to enter text |
|  | Roof assessment/evaluation issues |  | Uncontrolled access zone | |  | Other: Click to enter text |
| Safety Preparations (check all that apply) | | | | | | |
|  | | | | Describe Safeguards and Actions Required | | |
|  | Minimum of two persons performing work (required) | | | Click to enter text | | |
|  | Radio communication to/from ground established (required) | | | Click to enter text | | |
|  | Lighting provided for night work | | | Click to enter text | | |
|  | Weather conditions safe | | | Click to enter text | | |
|  | Falling object protection provided | | | Click to enter text | | |
|  | Fall protection/work plan (required - must be attached) | | | Click to enter text | | |
|  | Skylights, roof openings and holes covered or guarded with covers/guardrails meeting regulated strength | | | Click to enter text | | |
|  | RF non-ionizing radiation hazard map | | | Click to enter text | | |
|  | Safe work practices for mechanical equipment use reviewed | | | Click to enter text | | |
|  | Hot work permit | | | Click to enter text | | |
|  | Evaluate roof loading – added support required? | | | Click to enter text | | |
|  | Other: Click to enter text | | | Click to enter text | | |
|  | Other: Click to enter text | | | Click to enter text | | |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Review/Access | | | | | | | |
| Important Note: Permit reviewer(s) cannot be the person(s) accessing the roof. | | | | | | | |
|  | | Name | | | Signature | | Date |
| UW Point of Contact (project manager/supervisor/building coordinator) | | Click to enter text | | |  | | Click to enter date |
| Contractor supervisor/manager  (of contracted employees who will access roof) | | Click to enter text | | |  | | Click to enter date |
| Permit Expires: | Date: | Click to enter date | Time: |  | |  | |
|  | | | | | | | |

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| --- | --- | --- |
| Contracted employee(s) trained to work under this permit | | |
| Name (print) | Signature | Date |
| Click to enter text |  | Click to enter date |
| Click to enter text |  | Click to enter date |
| Click to enter text |  | Click to enter date |
| Click to enter text |  | Click to enter date |
| Click to enter text |  | Click to enter date |

**Post this permit at the entrance to the roof.**